

Smith (G. A.)

ON THE

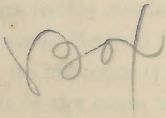

# SANITARY CONDITION

OF

**MEMPHIS, Tenn.,**

BEING A PEPLY TO DR. GRANT,

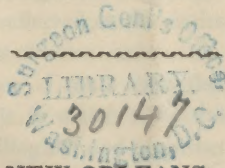
BY

  
  
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ON THE  
**SANITARY CONDITION**

OF

**MEMPHIS, Tenn.,**

BEING A REPLY TO DR. GRANT,

BY G. A. SMITH, M. D.,

*Surgeon to the Memphis Charity Hospital.*

The following paper is intended as a reply to the one drawn up by Dr. Grant, on the "Vital Statistics," &c. of Memphis, and which appears in this number of the Journal. As *both* essays were read before the *same* Medical Society, of which both gentlemen are members, we see no impropriety in inserting the reply of Dr. Smith ; but we must state at the same time, that we object to some of the expressions by which Dr. S. seeks to correct the errors into which he seems to think Dr. G. has fallen, in his article on the health of Memphis. If we publish the one, and refuse admission to the other, we shall be accused of partiality. We trust, that if, hereafter, this subject should elicit any more discussion, the parties will pursue it in a calm and philosophical spirit, and free from all personalities. (Ed.)

MR. PRESIDENT AND GENTLEMEN :

At the last regular meeting of this Society, a paper was read by Dr. Grant, which, while it reflected on the entire Medical Faculty of the City of Memphis, contained some statements, involving my reputation, that demand some notice. I shall show that Dr. Grant's paper, and particularly that part of it in which reference is made to the Hospital under my supervision, is illogical and incorrect. When a medical man assails the reputation of a whole medical community, and designates, in terms of exceeding disrespect, that portion of it with whom he pretends to act, it is quite time that he be rebuked in the most decided manner ; and while I do not take upon myself to vindicate my brethren, I feel



authorized, and do unhesitatingly denounce the course pursued by Dr. Grant, as unworthy the character of a member of the "Memphis Medical Society," and a member of the Medical Profession. His effort seems to have been directed against the Medical gentlemen of Memphis, and his aim to destroy their good name and fair reputation, and upon the ruins to rear his own. He has called Daboll and Cocker to his aid, and with an array of figures, he has endeavored to convince us, that one out of every 13 of our citizens die annually; and that of those who have the good luck, or good sense, to keep alive, none are satisfied unless they have at least *one* "spell," and more than half *two* "spells" of illness, every year. Indeed, it is not a little surprising, that the gentleman himself was not terrified by the fearful form he had conjured up; and I can only account for his still remaining in the land of the living, by his being a self-constituted officer, "Curatores Cloacorum Urbis," whose duty it was to take care of the common sewers. Now, whether the Doctor's official connection with the goddess C \* \* \* shields him from the various ills to which flesh is heir, I know not; but he seems to preserve a tolerably good condition, and a wonderful degree of gravity, while dissecting our reputations.

It is not my purpose, however, to bring him down with the shaft of ridicule. I wish to present a plain, common sense statement of facts, that will at the same time contradict his assertions, and vindicate myself and our profession. While I shall show that Dr. Grant's report is incorrect, as regards the mortuary statistics of the City generally,—it is particularly my object to notice so much of it as is contained in the following statement: "The total number of admissions into the Memphis Charity Hospital for the year ending on the 31st December last, was 474. The books show that 116 of these have died; making a mortality of 24.47 per cent; wanting a fraction only of being one out of every four, or very nearly  $24\frac{1}{2}$  out of every hundred!! That this is a terrific mortality, will become quite evident, by comparing it with the annual mortality experienced in other Hospitals, some of them in localities confessedly insalubrious"—and then instituting comparisons; and having made the matter appear in its very worst aspect, without an effort to defend the reputation of a professional brother; and, as it were, mourning over the destruction he had himself sought to accomplish, proceeds—"That as any farther inquiry would serve only to increase the melancholy reflections which naturally intrude when we compare our Hospital returns with those of similar institutions in this or other countries, we leave this branch of our subject."

This Hospital is compared with other similar institutions,—and in

the comparison not a word is mentioned as to the police or arrangements of our Hospital. Dr. Grant knew, when he was making out that report, that the support of our Hospital was very inadequate—that we have never, until the past few months, since I have been the Physician, had more than a single nurse—that we have had no apothecary—no assistant, who may be applied to in any emergency; and that frequently it is impossible to obtain the remedies which are required for the treatment of the cases. Could he not have mentioned these facts, or does he not know what is necessary in the regulation of a well-arranged Hospital? There is not a Hospital that I am acquainted with, that is not supplied with at least one, and generally two, nurses to every ward; nor do I know of another institution, where it is impossible to obtain, not only any remedy, but a skilful person to put up the Physician's prescription, and to attend, if necessary, to its administration.

But there is another item to which I wish to direct the attention of the Society—and it is, the state in which many of the patients are received into the Hospital. Before making any remarks on this head, to show that it is proper for me to allude to it, I quote from the report of the Resident Physician of Bellevue Hospital, New York, in which were treated upwards of 7000 patients in the year. He says—"During the past year, three have died at the very door, in the vehicles in which they were brought; 10 more within two or three hours after admission; and 40 within the first week."

Again, he says—"Very many are sent from the City Hospital, where they have been for months under treatment, then pronounced incurable, and dismissed for us to take charge of for the rest of their lives. Others come directly from the city, with the certificates of Physicians, who have for a length of time attended them, and who, finding that their remedies are of no avail, or, what is more probable, that the purses of their patients are entirely emptied, send them to the Hospital to die."

Dr. James D. Fitch, the Physician in chief of another Charity Hospital in New York, in which, during the year, he treated 464 (28 less than the number treated in our Hospital) and out of whom there were 90 deaths from ordinary disease—there being no Cholera or other epidemic disease—states, "The number of deaths may seem at first sight large; but when it is recollected that more than half the number admitted have been received in a state of great wretchedness—broken down by disease and want—many having died within a few hours of their reception—even before they could be cleansed of their filth, or



made in any way comfortable—so far gone, indeed, that no attempt at medical treatment could be made—it must cease to be a matter of surprise.”

Now, I ask, how do these extracts compare with the condition of things in the Memphis Hospital? At the Bellevue Hospital, there were upwards of 7000 patients treated. “Three,” says the report, “died at the door; 10 within a few hours of admission, and above 40 within the first week.” At the Memphis Hospital, there have been, out of those terminating fatally, during the last year, 40 occurring within 12 hours, and 34 others within three days—making a total of 74 deaths within three days of admission. Indeed, the condition of things has been so much in my favor, that the Trustees, in their report to the Legislature, use the following language. After stating the number of admissions, discharges and deaths, they say—“This, at first glance, may seem to be a very large per centum, in comparison with the number admitted; but when it is taken into consideration, that not over one in six of the applicants is admitted, owing to the inability of the institution, for the want of means, to receive more, it is necessarily the case, that none but the most needy and worn out by disease, are received. We would further remark, that it is a very common occurrence,—especially during the prevalence of Cholera,—that many have died within a few hours after they arrived, and some while on the way; so that the large number of deaths cannot fairly indicate the success of treating disease in this Hospital, in comparison with many others, for the reasons above stated.”

Another point to which I wish to direct the attention of the Society, is, that Dr. Grant has selected a year that was confessedly the most sickly one we have ever had, and from the mortuary returns of that year, has drawn his conclusions as to the vital statistics of not only the Hospital, but the City. That this is absurd, must be apparent to all; and he seems himself to be aware that he was doing an unjust act, for he distinctly admits, in his paper, that it is unfair to take the returns for one or two years, as it might be unusually healthy, or uncommonly sickly; “with us the latter was the case last year; it is generally conceded to have been among the sickliest, if not the most unhealthy of any season that has preceded for the past ten years, or since Memphis began her rapid increase in population.” Knowing this to be the case, why has he chosen the most unhealthy year, and by comparing it with the statistical returns of other cities for a series of years, deduced the absurd conclusion, that ours is the most unhealthy city in the United States? He ought to have seen enough to know, that a report like the

one he presented, would have a deleterious effect on Memphis—on the increase of its population—its commerce and business generally—on the value of its real estate and other fixed property—and, indeed, on all the efforts that are being made to ensure its prosperity. But more—does he attribute the fatality to the proper causes? Does he take into consideration the number of persons brought here for burial from abroad? Not so. The transient, literally, floating population of Memphis—I mean strangers, and persons on or connected with the flatboats, who furnish very many of the deaths, he has reckoned as residents of Memphis, in making out his mortuary returns, but has not added their numbers to his vital statistics. I learn from Mr. Wolff, the wharfmaster, that during the year, the number of flatboat men here who are liable to disease, amount, in the aggregate, to the sum total of the entire population of the City. These are not reckoned, as residents of Memphis, in the census, and yet they furnish a very large proportion of the deaths, and probably much more of the disease and deaths than the real residents, because they are, from their habits, manner of living, and exposure, necessarily incident to their way of living, more liable to contract disease, and from the little care that can be given them by their associates, their chances for recovery, greatly lessened. It is true, that there are reckoned, as residents, the inhabitants of 60 boats, that remain here the most of the time, and that these 60 boats average four persons to each boat; and, consequently, add 240 persons to the population of the town.

To return to the Hospital. There were admitted during the year 1851, 27 cases of Cholera. Of these 20 died. Two of the cases which terminated fatally, were treated by other Physicians; and 10 others died within a few hours after admission. If, now, I leave out these cases of Cholera, and those other cases, which died before they were placed under my medical treatment, I will compare my treatment with that of any other Hospital in the United States, taking into consideration the disadvantages under which I have labored, for want of proper attendants, there being no person to receive the patients, and I not seeing them, generally, until the day after admission. These, and other circumstances, already alluded to, will make my report as favorable as that of any other institution.

Take those diseases which have been most prevalent, and which have furnished the majority of cases: Of Bilious Fever, there were admitted 59 cases, of which 6 died. Of Typhoid Fever, 35 cases, of which 7 died. Intermittent Fever, 70, of which none died. Of Dysentery, presenting some of the characteristics of Cholera, 25, and 12 deaths.



Diarrhœa, 35 cases, and 2 died. Mania a Potu, 12 cases, and 4 died. Of Pleurisy, 9 cases, and no deaths. Of Ascites, 9 cases, and 2 deaths. Of Anemia, 7 cases, and no deaths. Of Small-pox, 24 cases, and 3 deaths. Or a total of 286 cases, and 36 deaths.

I shall now proceed to compare my practice, at the Memphis Charity Hospital, with that of the Physicians who have preceded me. Dr. Doyle was Physician to the Hospital from the 25th of March, 1846, to the 2d of October, '47, a period of 18 months and one week. During this time he treated 288 cases. Out of this number there were 84 deaths, or a per centage of 29.26. Or, take the statistics for one year, from the 25th of March, when he took charge of the Institution. In this year there were 216 cases admitted. Of these cases 62 terminated fatally ; a per centage of 28.24. It is to be borne in mind, that not only did Dr. Doyle reside at the Hospital—that the same amount, \$5000, was appropriated by the Legislature, for the support of 216 patients, in his time, as is for 492 patients in mine—but that, in addition, he had the valuable aid of a medical student, to see that his instructions were obeyed, and to superintend, under him, the regulations of the Hospital. No person will attempt to derogate from the professional skill and attainments of Dr. Doyle ; he was justly honored as a scholar, and was at the head of his profession. More than this, he was a colleague of Dr. Grant in the Memphis Medical College, in which Institution he filled the Chair of Surgery with distinguished ability.

Dr. Doyle was followed by Dr. Sappington, and it affords me pleasure to accede to his request, and make a statement as regards the Hospital, during his service as Physician. There were received into the Hospital, during his time, from October 7th, 1847, until the 5th of February, 1849—a period of 16 months—356 cases. According to his books, 159 of these were Volunteers in the Mexican war, and were attended by the Surgeons of their Regiment. The remainder, 197 cases, came under his immediate care. It is proper I should state, that Dr. Sappington, for a period of two months, or more, was prevented by an accident from attendance at the Hospital. Of these 159 Volunteers treated at the Institution, 28 died ; or a per centage of 17.61. These Volunteers, it must be remembered, were a far superior class of patients to those usually admitted into the Hospital. Of the 197 cases who were not Volunteers, 56 terminated fatally, or 28.47 per cent.

I took charge of the Hospital on the 5th of February, 1849. Uncertain whether I should be appointed Hospital Physician, for a period of two months, until my election by the Trustees, I kept no account of the patients. From April 5th, 1849, to January 1st, 1850, a period



of nine months, 157 cases were treated. In 1850, 292 cases were treated. In 1851, 492; and this year, so far, 79. In all, 1020. Of this number, 14 cases were treated by other Physicians, leaving 1006. Of the 14 cases not mine, 8 terminated fatally. Of the whole number, 240 have died; a per centage of 23.52. Subtracting the eight fatal cases treated by other Physicians, the per centage of deaths occurring in my own practice, is 23.06—a per centage of deaths very considerably less than that of either of my predecessors.

In passing, I may allude to the fact, that Hospital patients would seem to be safer in the hands of the Hospital Physician; since of the 14 cases treated by others at the Hospital, eight died—a per centage very much greater than can be made out under my treatment.

During the time the Hospital has been under my care, the Small-pox and Cholera have visited our City in an epidemic form; the latter disease adding considerably to the mortuary list. At no period, since the establishment of the Hospital, previous to the 22d of December, 1848, not quite two months before I took charge of the Hospital, were there any cases of Cholera. During Dr. Sappington's connection with it, but two cases only are recorded. After my appointment, the cases began rapidly to increase, and there have been two visitations of it, since it has been under my charge.

Speaking of Cholera, I may mention a fact, still fresh in the minds of most of the members of the Society. The author of the essay read at our last regular meeting—I mean Dr. Grant—penned a communication, the paternity of which he will not deny, signed “A Physician,” which appeared in the “Memphis Eagle,” of January 3d, or 4th, 1849, in which his logic is so very like that exhibited in the essay under consideration, that I refer to it to illustrate his mode of reasoning, and the confidence to which it is entitled. He says: “With the facts before us, that the present epidemic Cholera is pursuing the same line of march as the former pestilence followed—that it is delayed in its progress by cold weather, and that the first reported case of the present disease occurred in London a little over two months ago only,—a sufficiency of data on which we can rely is at our command, to justify us in the assertion, that epidemic Asiatic Cholera is not at present prevailing in the City of New Orleans, and cannot be for months to come.” And why? Because, forsooth, it would not have pursued its *former line of march*, by the way of the Canadas, and the Lakes, and so *down* the Mississippi river!!

For some time previous to its publication, the papers were filled with

the reports of the Cholera in New Orleans, and in the paper next following that in which A Physician's communication appeared. there is contained a report of the New Orleans Board of Health, taken from the "Delta," in which it is stated, "The Board regrets to have it to state to the public, that the Cholera continues to prevail, in several portions of the city and faubourgs, in an *epidemic* form, and that seventy hours of good weather has not, as the Board hoped for, checked the ravages of the disease."

Now, here are facts, against logic, but it is logic of a pseudo sort—such as is so richly dished up in the intellectual feast of words and figures, furnished us at our last regular meeting. But as the Frenchman said in a similar case, "so much the worse for the facts." It may be thought out of place, that I should allude to the communication on Cholera by Dr. Grant; but I do so to show the errors of his reasoning. He believed and stated, that the *Cholera could not travel up* a river—that it *must come down*. That he could easily believe,—like the boy in climbing a greased pole,—the coming *down* was easy enough, but the getting *up* was quite another affair.

But, gentlemen, I have done. I have accomplished my object. I have shown, that the patients received into the Hospital are in the most abject state of destitution and disease—that my treatment has been more successful than that of either of my predecessors, notwithstanding the advantage which one of them possessed, of a residence at the Hospital—notwithstanding the very inadequate support of the Hospital—the want of proper attendants—the prevalence of Epidemic Cholera—the prevalence of Epidemic Small-pox. As a Physician, my reputation is more valuable to me than any thing on earth, and if I have said harsh things, it is giving blow for blow. I allow no man to assail my professional character.

In bringing my paper to a close, it is unnecessary for me to repeat my candid belief, that Dr. Grant has made an unfair statement of the vital statistics of the City. He admits, that in his mortuary returns he has included those who have not died here. They cannot belong to, nor should they be reckoned among, the deaths, which are chargeable to causes which exist in our midst—the state of our streets—the condition of our bayou—nor even to the temples of Cloacina—of which he writes so pathetically.

The number of flatboat men—averaging the sum total of the actual population of the city—who swell so greatly our mortuary returns, are not alluded to in Dr. Grant's paper; or if alluded to, it is in such an *ad captandum* style, as destroys all confidence in his accuracy. He



may, perhaps, contend, that it is unimportant where such persons are taken sick, or where they die, so that they find sepulture within the corporate limits of the town, they are to be reckoned on our mortuary list. This is as fair as it would be for him to enter one of our cemeteries, and summing up the number of graves, deduce the ridiculous and absurd conclusion, that to the graveyard was due the causes which had led to the death of all buried therein.

It is not my purpose to reply to the whole paper read by him, and I throw out these suggestions for the consideration of the Society. I feel confident I have made such an exhibition of his unfairness, as relates to the Hospital, as will throw discredit upon the whole subject of his paper. The vital statistics of a city bear too intimate a relation to its prosperity, to be drawn up in any way other than the most careful and judicious. That the paper of Dr. Grant is not so drawn up—that his statements are loose—and notwithstanding he has shown himself an adept in figures, that he has miscalculated the influence of endemic causes of disease, are truths too evident to need farther comment.

